

**IL HIE Medicaid Work Group
Meeting Notes
September 22, 2014**

Attendees (by phone):

Dave Barnes	Department of Healthcare and Family Services
Janet Baxter	Alliance of Chicago
Pat Borrowdale	Pediatric Health Associates
Kelly Carter	Illinois Primary Health Care Association
Connie Christen	Department of Healthcare and Family Services
Kathy Compratt	University of Chicago Medicine
Julie Glen	Loyola University Medical Center
Peter Ingram	
Wyona Johnson	Department of Healthcare and Family Services
Robert Kolodenko	Loyola University Medical Center
Scotty McLaughlin	Department of Healthcare and Family Services
Rachel Mills	Rush University Medical Center
Mary Ring	Illinois Critical Access Network
Theresa Walunas	Chicago Health Information Technology Regional Extension Center (CHITREC)
Dale Webb	Department of Healthcare and Family Services
Eva Winckler	Chicago Health Information Technology Regional Extension Center

1) Review of Minutes

The work group approved the September 8th meeting minutes.

2) Electronic Health Record Medicaid Incentive Payment Program (eMIPP) Status Update

- **Payments to Date**
- **Processing Queue Statistics**
- **2013/2014 Attestations**

Dave Barnes reported that 20 Eligible Professionals (EPs) for 2013 and five for 2014 were paid since the last work group call. Over \$414 million has been paid to providers since the program began. A query was run to find out that there are 407 EPs who are qualified for stage 2 right now.

There are just five EPs left in the 2013 queue and they have been approved for payment.

3) Update on the Revised Centers for Medicare and Medicaid Services (CMS) Rule

Dave took part in a meeting with CMS staff regarding the rule. One thing that was highlighted was the Flexibility Rule. The rule grants flexibility to providers who are unable to fully implement 2014 Edition CEHRT (Certified Electronic Health Record Technology) for an Electronic Health Record reporting period in 2014 due to delays in 2014 CEHRT availability.

Providers in their first participation year in program year 2014 who are attesting to AIU (Adopt, Implement, Upgrade) must use the 2014 edition CEHRT. Providers in their first participation year in program year 2014 who are attesting to meaningful use may use the options listed in the Flexibility Rule (2014 CEHRT, combined 2011/2014 CEHRT, 2011 CEHRT), but only if they are unable to fully implement 2014 Edition CEHRT because of issues related to 2014 Edition CEHRT availability delays when they attest to the meaningful use objectives and measures.

CMS received 35,000 hardship requests that they are reviewing. If anyone's issue for a hardship was due to a vendor issue, 98% of those were accepted.

Meeting adjourned. The next call is scheduled on October 6th.